Case 2:06-cv-01034-WKW-WC	COMPLETE THIS SECTION ON DELIVERY	006 Page 1 of 1
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. signature B. Peceived by Printed Name) C. Di B. Selivery address different from item 1?/	Agent Addressee ate of Delivery
Article Addressed to:	If YES, enter delivery auditor 2:04:0 /0 34 5 & C	
BAYER CROPSCIENCE, INC., c/o Its Registered Agent:	3. Service Type Gertified Mail Express Mail	ot for Merchandise
C.T. Corporation 575 / 746 / 1	51 Insured Mail Trc.o.b. 4. Restricted Delivery? (Extra Fee)	Yes
10117 34	10 0004 0799 3632 Omestic Return Receipt	102595-02-M-1540
P2 Louis A.		